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ABSTRACT

Although the need for psychological counseling for the unemployed has been recognized, the development of specific counseling strategies for this population has not been systematically addressed. The need for specific counseling intervention strategies for the recently and chronically unemployed was examined in a study of 25 recently unemployed and 19 chronically unemployed workers. Subjects completed the Tennessee Self-Concept Scale, the Beck Depression Inventory (BDI), and a personal inventory which contained items on personal issues, primary relationship and family change, and perceived causes of unemployment and job needs. Highly distressed subjects were also administered the Minnesota Multiphasic Personality Inventory. The results revealed that 22 subjects were rated to be chronically unhealthy psychologically, 9 subjects showed signs of psychological difficulties due to temporary stress, and 13 subjects were rated as psychologically healthy. The chronically unemployed subjects were found to exhibit significantly higher rates of psychological disturbance than the recently unemployed subjects. There were no significant differences between recently and chronically unemployed subjects on BDI scores, certain scores on the Tennessee Self-Concept Scale, or in Internal/External scores or requests for counseling from the personal inventory. Several implications can be drawn from these results, among them that global psychological assessment was highly reliable while individual psychological instruments were not. (ND)

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Psychological Assessment and Counseling Intervention Strategies for the Unemployed*

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The current unemployment rate for the city of Long Beach is approximately 10%. Recent plant closures have greatly added to the number of unemployed. Focus on psychological correlates of job loss has increased nationally and locally, and the pronounced and unique mental health needs of the unemployed have become evident.

Despite the current interest and felt need for psychological counseling strategies for the unemployed, the development of specific counseling strategies for this population has not been systematically addressed.

The present project addressed the need for specific counseling intervention strategies for both recently and chronically unemployed persons. The project was designed to: 1) assess the psychological health of the unemployed; 2) compare the level of psychological disturbance specific to the chronically unemployed vs. recently unemployed workers; (It was hypothesized that the chronically unemployed would exhibit significantly higher rates of chronic psychological disturbance than the recently unemployed participants); 3) Develop counseling intervention strategies specific to the needs of the unemployed; 4) provide psychological services to unemployed workers in need of treatment.

Method

Subjects

The sample consisted of 44 recently and chronically unemployed workers from the Long Beach area who were participants in the Job Search Assistance (JSA) program at the CSULB Community Clinic. The sample included 15 female and 29 male volunteers, ranging in age from 22 to 63. Recently unemployed workers were out of work six months or less, and had a steady employment pattern over the past two years (N=25). Chronically unemployed workers were defined as unemployed beyond six months, or recently unemployed with an unsteady employment pattern over the past two years (N=19).

Materials

Subjects were individually administered a battery of tests: a personal inventory (items concerned personal issues, primary relationship and family change questions, perceived causes of unemployment and job needs), the Tennessee Self Concept Scale, and the Beck Depression Inventory. Unusually distressed subjects were also administered the MMPI.

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Method

Procedures

JSA participants were individually interviewed and invited to participate in a project investigating the need for personal counseling among the unemployed. Volunteers were individually administered a (1 to 1-1/2 hour) battery of tests: a personal inventory, Tennessee Self Concept Scale, and the Beck Depression Inventory. The MMPI was also administered to participants exhibiting unusual distress. The personal inventory was administered in interview format and participants were encouraged to elaborate on items which they rated as being a high source of stress. A follow-up interview to give participants feedback on the battery, and to offer counseling services was also conducted.

Results

Objective 1

To assess the psychological health of the unemployed.

The three counselors working with the participants each independently made a global assessment of the psychological health of each participant according to the following scale:

- 1 = Psychological health (no evidence of significant personality or behavioral deficits)
- 2 = Psychological difficulties due to temporary stress of crisis
- 3 = Chronically unhealthy psychologically (evidence of significant personality and/or behavioral deficits)

The global assessments (modal ratings) were based on a participants' test battery and clinical interviews. Unemployment status and length of time out of work was not known by the three raters at the time the ratings were made.

An interrater reliability coefficient of .85 was obtained ($p < .01$).

The distribution of participants according to the rating scale used was: 1 = 13, 2 = 9, 3 = 22.

Objective 2

To compare the level of psychological disturbance specific to the chronically unemployed vs. recently unemployed workers.

Pearson χ^2 analyses were performed on recent and chronic unemployed categories across psychological health measures (Table 1).

Table 1

Psychological Health by Unemployment
Status for N = 44 Participants

Unemployment Status	Psychological Health Category			
	<u>1</u>	<u>2</u>	<u>3</u>	
Recent	10	7	8	25
Chronic	3	2	14	19
	13	9	22	44

The hypothesis that the chronically unemployed would exhibit significantly higher rates of chronic psychological disturbance than recently unemployed participants was confirmed here with $\chi^2 = 7.63$, $df = 2$, $p < .05$. The coefficient of contingency was $C = .38$.

The above data were broken down by gender, as follows:

Table 2

Psychological Health by Unemployment Status by
Gender for N = 44 Participants

		<u>Psychological Health Category</u>				
		<u>1</u>	<u>2</u>	<u>3</u>		
<u>Unemployment Status</u>	Recent	Male	7	4	6	17
		Female	3	3	2	8
	Chronic	Male	1	0	10	11
		Female	2	2	4	8
			13	9	22	44

Separate χ^2 analyses were performed for males and females on these 2 x 3 frequencies. For males $\chi^2 = 8.59$, $df = 2$, $p < .05$, $C = .48$, and for females $\chi^2 = 1.07$, $df = 2$, $p > .20$. (It should be noted that for males 4 cells had expected frequencies less than 5, and for females all 6 cells had f_e 's less than 5.)

There were no significant differences in recent and chronic unemployment participants in BDI scores, NDS scores for the Tennessee Self Concept Scale, Internal/External scores from the personal inventory or requests for counseling from the personal inventory.

Other variables analyzed were marital status, age, weeks in the JSA program, employment status 0, 21, 45 days after leaving the program, education, type of past work, and type of work sought. None of these predicted months out of work or psychological health.

Objective 3

To develop counseling intervention strategies specific to the needs of the unemployed.

It was not possible to meet this objective for several reasons. First, and most importantly, the sample was too small and heterogenous to permit application of different treatment modalities (e.g., groups vs. individual, stress reduction vs. problem solving), for the same types of psychologically distressed participants, and participants came to the program in an aperiodic and non-systematic way.

Furthermore, participants who needed and were recommended for counseling were often resistant. Of the 12 of 44 recommended for counseling, 5 declined to come in and one withdrew after only three individual counseling sessions.

Finally, of concern was the ethical implication of manipulating treatment modalities for subjects who were already wary of being thought of as disturbed at the time they were job seeking.

Objective 4

To provide psychological services to unemployed workers in need of treatment.

A total of 85 direct counseling contact hours were given to participants in the program. Broken down by psychological health ratings, 13 contact hours or 15% of the total were given to rating 1 participants, 9 or 11% to rating 2's, and 63 or 74% to rating 3's.

(Not included in these hours were phone contacts, referral activities or case conferences.)

Discussion

Several implications can be drawn from this preliminary study. (A current study involves approximately 350 participants seen over an 11 month period.)

1. Global psychological assessment was highly reliable. Individual psychological instruments were not.
2. Chronically unemployed individuals are significantly less intact psychologically which may account for their poor unemployment histories.
3. Male participants accounted for the variance in the significant unemployment history-psychological health relationship. Of interest here may be the commonly held notion that women have more support systems to bear them through times of crises. Further research is needed to explore this possibility. A less sanguine possibility is that because all three counselors were female, observer bias may have occurred (e.g., not seeing as much disturbance when it was present.) Again, however, f_e s were quite small particularly for the female participant analysis.

4. A disproportionate percentage of the time made available to participants went to those who were chronically psychologically disabled (74%). These are individuals who probably are unable to maintain steady employment without long term psychological assistance (and some not even then).

It is recommended that better screening procedures be used in job training and job search assistance programs. It is not cost effective to use such a large portion of resources on individuals who have such low probability of success. Screening procedures need to be developed to increase cost effectiveness and perhaps decrease feelings of failure among those who need other kinds of assistance at this time in their lives.

5. Included in the screening procedures and verification for suitability for programs, job search and job training applicants should be counseled as to the desirability of accepting psychological services. Clinicians ethically do not force services on individuals, but education regarding the correlation between psychological health and employability is needed, both within employer and employee populations.
6. Much research still is needed to determine whether there are particular intervention strategies which are relatively effective for particular kinds of distressed unemployed persons. No conclusions are possible in this study primarily because of the small and heterogenous sample.